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APPLICANTS

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**** CONTINUING DATA *******

This appln claims benefit of 60/063,876 10/31/1997

**** FOREIGN APPLICATIONS *********** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

11/16/1998

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance			
Verified and Acknowledged	/GOLLAMUDI S KISHORE/ Examiner's Signature	Initials	MD	14	19
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ADDRESS

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TITLE

METHOD OF INHIBITING SIDE EFFECTS OF PHARMACEUTICAL COMPOSITIONS CONTAINING AMPHIPHILIC VEHICLES OR DRUG CARRIER MOLECULES

FILING FEE RECEIVED 1486	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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